DISEASES

OF

NORTH VICTORIA

(CAPE COLONY).

BY

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Medical Reports and Tables.

(CAPE COLONY.)

I.—REMARKS ON THE DISEASES TAKING PLACE IN THE COLONIAL FORCES, WHITTLESEA, NORTH VICTORIA, SOUTH AFRICA, enumerated in the Returns, Nos. 1, 2 and 3, from 1st October 1851 to the 31st of March and 30th September 1852. By WILLIAM T. BLACK, M.R.C.S., Assistant-Surgeon to the Staff, South Africa.

1. In reviewing these returns, the cases of *Fever* will be observed to have increased from October to February, and to have diminished in March. The smaller number noted in December was owing to the absence of a large number of men on patrol to the Kei River, which continued out from 1st December to 16th January 1852, in which last month there were, however, more fresh cases than in December, though the men were absent the half of the month. These men, however, during this month of extraordinary weather, thunder and showers of rain occurring every day, being exposed in the field, suffered very much from dysentery. These cases of fever occurred generally amongst adults and children, while the women were very little affected with the disease. Many of the cases assumed a congestive type, and probably received this determination from the same remote cause, scorbutus, as the dysentery,—that is, of the more flux-like form of it.

Probably, the sudden change of the season, from long continued dryness and heat, for six months, that took place at the end of November, to comparative coolness and moisture,

had the effect of reverting the mass of blood in the superficial circulation to the internal parts;—perspiration at the same time being suppressed, as was evident from the symptoms in such cases. In these cases of fever this passive congestion of the fluids may be considered to have been general; while it would have been confined to the partial circulation in dysentery;—and thus no outlet would exist to disburthen the heart. This state of oppression was wont to continue a long time, and no reactive fever set itself up; the tongue used to be found white; the pulse frequent but not strong; the mind oppressed and dull; appetite much diminished; the bowels irregular; the urine loaded, and dull pains complained of in the head, back, &c.

In the early stages, a vigorous emetic and purge was found to give great relief, repeated if necessary, which was generally requisite, according as the bowels got confined. In more advanced cases where the organic vitality had diminished, and the heart had less power to recover itself, and effusion was threatening to take place from the veins in the head especially, a mixture in camphor water of antimony, nitre, and salts, with a blue pill occasionally, so as to excite the excretory powers of the various organs, seemed to have a good effect;—with a blister to the head, or such parts as were most complained of.

2. *Ophthalmia* became common during windy and changeable weather, increased as to its cause by the dryness and quantity of dust carried about, before the ground became more saturated with moisture. It seems to have affected children less than adults of either sex, and consisted of common conjunctivitis, which subsided under the usual local applications, though requiring medicine to reduce a febrile catarrh by which it was sometimes accompanied. The neglected cases in adult Europeans proceeded to partial blindness; mercury given so as to keep the mouth affected led to great relief in the one, combined at a later period with quinine; and the restoration to a certain degree of health in the other was accomplished by quinine mixture internally.

3. *Meningitis* assumed, in its earlier stages, the form of congestion; in fact, being a more localised degree of the

congestive fever before alluded to, and going on to effusion within the head, not of an active description. But if I had had an opportunity of a *post mortem*, in a fatal case, there would most likely have been found to be a jelly-like serum in the arachnoid and ventricles. These cases occurred, also, during the unusual weather of November and December, and in the younger cases seemed to have had connection with the exposure of the head, without proper covering, to the hot sun. The symptoms at the commencement were obscure and smothered; loss of appetite, costiveness, apathy of body and mind, dry skin, low pulse, coated tongue, slight heat of scalp, pupils steady and unirritable. An emetic and smart purge, given when first seen, appeared to rouse the circulation to more activity, and followed by a mixture of salts, nitre, and antimony, with blue pill or calomel at night, allowed the better play of the excretive organs, which seemed to lie dormant. Warmth to the feet and cold to the head, and, in later stages when effusion had seemingly taken place, blisters to the nape of the neck and scalp were employed. One or two cases were much benefited by powders of calomel and antimony, changed as expedient to James's powder, instead of the tartrate, when the latter caused too much irritability of the stomach and bowels; and nitre was also added when urine was deficient. Tea and coffee were found to be very injurious in such cases, generally increasing the congestive and giddy feelings in the head and not aiding free perspiration. No cases were fatal.

One in a European boy proceeded to hemiplegia of one side with dilated pupil, corresponding. Stimuli were then given, and mustard-poultices and hot-water applied to the feet; and under the above treatment, persevered in strictly, recovery took place, though the emaciation was great. Adherence to a continued free perspiration seemed to be most advantageous. During convalescence afterwards, a sense of giddiness used to continue for some time, and a dread of the heat of the sun, but the appetite soon regained its power, and, with the assistance of quinine mixture, the nervous tone was restored, though slowly.

4. The cases of *Bronchitis*, *Pneumonia*, *Pleuritis*, and *Hepatitis*, all occurred from unusual exposure to the inclement

weather of the beginning of summer, and took place chiefly amongst the coloured levies, except two attacks of the last disease, which happened to a European female, who, when a soldier's wife in India, had the disease very severely. One case of pneumonia, which terminated in purulent expectoration, died, and one of pleuritis in a black female likewise proceeded to the fatal termination.

5. The case of *Otitis* was a European boy who had had otorrhœa for some years, and appeared evidently of a scrofulous constitution. It proved fatal from the spread of the disease to the brain, hemiplegia occurring before its termination. No treatment seemed of any avail.

6. The *Rheumatism* proved of ordinary chronic character, and does not require any special notice. No case assumed the form of acute rheumatic fever.

7. *Urticaria* occurred rather severely in two cases, there being much constitutional disturbance, and was probably owing to checked excretion of bile, or some digestive secretions; the circulation seeming to become overcharged and determined to the surface. One case required bleeding, in consequence of the blood being much accumulated to the head; and in the other, singularly after the eruption had come out, and the skin on the face and other parts was much swollen, sudden fainting twice occurred on the individual having occasion to go out under a hot sun in the middle of the day. On recovering from that state, the eruption had vanished, but the surface was bedewed with a clammy perspiration, and a sense of giddiness continued for several days after. Here I had reason to imagine the heart felt the effect of the change in the nature of the circulating fluid. The eruption and accompanying œdematous swelling made its appearance very quickly, so as to bring on urgent symptoms rapidly. Jalap and calomel, followed by saline solutions, contributed to relief of the symptoms.

8. The case of *Erysipelas* in a European came under treatment after the patient's return from the Trans Kei Expedition,

and affected the scalp and face. Antiphlogistic remedies were first given: but as loss of appetite continued, with a tendency to delirium, wine and tonic mixture was substituted with marked benefit, and recovery took place.

9. Of *Phthisis* one case proved fatal in a Hottentot woman and another in a European female, in its earlier stage, who was born in this country; but report alleges that the disease is common in the family, having been brought out from England by the father, and that one sister has already died from it. Nothing peculiar in the nature of these cases seems worthy of remark;—the fatal case had chronic laryngitis.

It might be a question interesting to settle whether European-Africans,—that is, those born in the country, ever acquire the disease here, and whether all cases that do occur are such as have been hereditary in the family before they left England. The climate, however, does not appear to be at all more favourable than in Britain for the relief of phthisis when once commenced. It is a very common disease amongst all of the Hottentot race, and carries off numbers of the Corannees beyond the Orange River. It is seldom, if ever noticed, as far as my information goes, amongst Caffres, Fingoes or such allied tribes. In the Hottentot, it seems to arise from pure degeneracy of breed, combined with a reckless careless mode of life, of similar character to that of the lowest Irish peasants. In the *post-mortem* examination of their children, I have seen almost every internal organ occupied with tubercular deposits before they were scarcely a year old, emaciation and destruction commencing in such soon after birth. Fatty liver I have also seen in a fatal case of a Hottentot woman some time ago. Scrofulous deposits in these people are also observed sometimes going on to abscess. In one case I saw it led to Empyema and death. Swelled glands in the neck, and suppuration in them, have also come under my notice at different times; and lastly, the leprosy, so common amongst colonial coloured people, may, without much doubt, be placed in the catalogue as scrofulous.

10. *Catarrh*, during the unsettled weather of November and December, was common, and might have come more under notice during the latter month, had the full force remained in

garrison. A considerable proportion occurred to children, especially the coloured. The symptoms varied from coryza to pulmonary catarrh, and demand no particular notice.

11. *Dysentery*, from the above cause, would also have shown more cases in December and January than otherwise do appear, but a great many cases occurred amongst the men in the field, nearly one-half of these in the returns happened to coloured women and children. Three deaths took place, two in Fingoes and one in a Hottentot amongst adults, and one European child also fell a victim to it. In the first two cases the result took place in from six to eight days, from the great difficulty evinced in checking the discharges by medicine. The case of the Hottentot continued a month under treatment, and was progressing favourably, when a relapse took place of bad symptoms, which carried him off in three days, during which, owing to some superstitious feeling that his wife had poisoned him, he could not be induced to take either wine or medicine.

The disease, as manifested in the European and Hottentot, seemed to possess a more active character than in the Fingoe, and the general system participated in the disease at an earlier period. Calomel and opium generally afforded relief, from every six hours for the first twenty-four, and then followed by a dose of castor oil or rhubarb, and if the symptoms continued in a milder form after that, powders containing calomel, opium, ipecacuanha, and gum, were given three times a-day. In the case of the European women and children, the substitution of *hydrargyrus cum creta* for calomel in the powders seemed to answer better. The powders, in any case where no urgent symptoms prevailed, were commenced with at first, and it was only where these graver symptoms prevailed that the former treatment with the pills was resorted to.

In chronic cases, where local pain was complained of, blisters were efficacious, and in one case, in a European burgher, were the only means adopted with a scrupulous attention to diet, as any medicine whatever appeared to irritate the stomach and bowels to a remarkable degree, calomel included. The patient had formerly had the disease, and was very liable to a return of it. He had taken considerable quantities of medicine in previous complaints. This disease was remarkably prevalent amongst the

Fingoes during the months of December and January, assuming more the form of a bloody flux than of an acute febrile disease. It was wont generally to begin gradually from a neglected diarrhœa, and more rarely to make its appearance suddenly, and then it was accompanied by acute symptoms from the first. In the ordinary flux-like form no other manifest symptom was present, except the constant desire to evacuate, and the matters consisted chiefly of pure dark blood. It did not seem to affect the general system much till after the loss of some quantity of that fluid, and the continuance of the irritation consequent on it; and then a febrile reaction used to be set up, and loss of appetite, thirst, and emaciation supervened. Before this would happen, a good dose of calomel, with jalap or rhubarb, usually put a stay on the progress of the disease, relieved the oppression of the colon, and the straining, and produced copious bilious stools. The patient was then wont to feel a lightness and relief to his sensations in the abdomen, and appetite returned.

In the further stages, when febrile reaction had been set up, calomel and opium, with or without ipecacuanha, seemed best adapted. Purges appeared then to irritate; and the pain was best relieved by a blister. The relief afforded at one stage by the unloading the liver freely would point out the nature of the disease as owing to obstructed portal circulation and the accumulation of the fluids in those vessels. Then again, as to the further cause of that, evidence is not so precise; that the portal circulation of the stomach was in the same condition might be inferred from the frequency of nausea and vomiting after meals. Amongst Europeans chiefly, in corresponding numbers, there was less amongst them of dysentery than among the Fingoes; but the women of the latter had it proportionally as much as the Europeans, and less of the dysentery.

In a former contribution I had endeavoured to more accurately define a theoretical cause for the complaint, scorbutic, which may be in general announced as originating in the peculiar diet that obtains amongst these people in winter time—namely, a scarcity of vegetable food at that time, and an almost entire dependence upon their rations, as meat, meal, rice, coffee, sugar, &c., and amongst those not receiving such, upon meat and dried mealies, or Caffre corn. The less activity of the colic circulation, and the overloading of the portal circulation

with albuminous matter, leads to stagnation of the former, which, becoming congested, eventually terminates in effusion of blood. In consequence of the colon being almost superficial in its whole extent, and the nearest intestine to the abdominal walls, supposing such a state of matters above mentioned as existing, any sudden exposure to cold or wet would at once generate an active disease from such materials; but should no such cause have operated, then the disease begins gradually, and runs a course as previously pointed out.

Amongst the hostile Caffres during war time, dysentery is very common, and carries off numbers. Here the diet is necessarily restricted to almost meat alone, especially when on the war path; the captured cattle, goats, and sheep, being slaughtered as required on the road. In both cases after their gardens have begun to produce crops, cases of the disease gradually lessen and disappear till the next recurring spring. During the summer and autumn they live almost entirely on fresh vegetable diet; the meat then being boiled up into a mess with the articles which they use, as pumpkins, green mealies, mealy stalks, beans, &c. Amongst Europeans this scorbutic cause may prevail, but to a less extent, as some cases amongst them show the same form of dysentery; the scarcity of fresh vegetable food at that season of the year influencing them in the same manner as the Fingoes, though, from having better means, they can purchase such articles as are good substitutes. I may remark that costiveness in these cases precedes the advent of the disease.

12. *Dyspepsia* ranks as the most numerous class of complaints in the return, and occurred consentaneously with the greater prevalence of other diseases. It was much more common amongst Europeans than among coloured people, and in them of a more decided type, and affected both the women and children, as well as the adults. As this complaint was more common amongst Europeans, so was dysentery more so amongst the coloured people. There was generally a want of appetite, and after the morning meal nausea and rejection of the food used to ensue, with a sensation of relief following, and some time elapsed before the person's appetite did again return. Vomiting of the evening meal used also to take place, though

not so often as the morning one. No other symptoms appeared; no pain, no further disorder of stomach; though the bowels were perhaps more costive than usual. If allowed to continue for some time the bowels would become affected and diarrhœa take place, a mild form of dysentery. A very light breakfast, without meat of any kind, persevered in for a time, along with abstinence entirely till the evening meal, would in some cases cause the disease to cease.

Hot weather generally more predisposed to it than cold.

Accompanying this in some cases, but at different times, a sense of giddiness in the head prevailed, especially during the day or in the sun, so severe as sometimes to induce the individual to fall down. The complaint is one which old residents at this place state generally to be common at that season of the year; but I had seen it also at Fort Hare during the war before. I am in doubt whether to charge its origin to functional derangement of the liver, which is highly probable; though in some cases in children affection of the head would show itself after neglecting to attack the dyspeptic symptoms, by heat of scalp, drowsiness, and other signs, as alluded to in milder cases of phrenitis.

There generally seemed to be an increased secretion of gastric juice, as such acid fluid was rejected before the food. If the liver was in fault, then I should conjecture that a similar state of matters with the portal circulation existed as in dysentery.

Fruit, fresh vegetable, and amylaceous food, was generally borne well: in fact, the reverse description to what had been in general use continuously before. Calling upon other secreting organs than the liver and gastric glands for reaction, as the salivary system and intestinal glands, seemed to act by way of metastasis to the others.

The *Diarrhœa* also proceeding consentaneously with the other season diseases, appeared generally of the bilious kind, and was most common in children, both white and black.

13. Nineteen cases of *Gunshot-wound* came under the course of my immediate treatment during the six months—some, however, of the wounded natives prefer trusting themselves under counsel of their own witch-doctors. In natives

these cases usually proceed very favourably, if common attention to eleanliness and position, in case of fractured bones, be paid. Simple water-dressing, warm or cold, aecording to circumstances, with lint, seemed to answer well, and splints were seldom required to the extent usually supposed necessary, and were little borne when so used. The treatment of the cases of fracture with gunshot-wound appeared best carried out by attention to position, instead of putting the damaged limb to any restraint by splints, whieh irritated and gave pain to the highly swollen state of parts which in these cases supervenes. Warm water dressings and fomentations fulfilled the intentions best, and the swelling after a time soon subsided; and in no ease had any extensive sloughing or formation of abscesses formed,—the wounds gradually eleaning, like those of simple flesh wounds, but of eourse continuing open much longer for the diseharge of pieces of bone, and the matter thrown out in the course of its regeneration. The separation of sloughs from the wounds seemed to take place at various periods, some being earlier, and others from five to ten days later,—the state of the weather appearing to influenee the proeess much, warm steady weather healing quieker than in cool unsettled. Fraeture of the thigh with gunshot-wound has been treated by merely laying the limb on its outside, with the knee-joint bent. Fracture of the leg has been treated in a similar way, and that of the humerus by supporting the fore-arm in a sling, with a splint for the arm to rest on,—no splints being used to the fractured bones themselves, but only bandaging sufficient to retain dressings.

Amongst some of the curious cases of gunshot-wound which I have seen during the war, I may mention the following. A ball having entered the ehest between the stomach and situation of the apex of the heart, obliquely, it was supposed, the wound healed; the man had recovered when last seen, but the lodgment or eourse of the ball was never discovered. In another, the ball entered the right groin on the outside, and appeared to course obliquely in towards the abdomen. Reeovery took plaee, but the ball was never detected when last seen. Death took place in another ease from injury to the lungs, the ball entering at the left ear, and was cut out of the integuments over the right hypochondrium. Death took place from hæmorrhage

before assistance could arrive after the patient's admission into hospital, from a gunshot wound of the right thigh, where it was discovered after death that the femoral vein had been cut through, though not the artery. No hæmorrhage ensued till the fatal event.

Officious surgery, in a case of gunshot-wound, with fracture of leg, I saw, evidently produced mischief. The medical attendant was partial to strapping, plasters, pads, and used various vegetable medicinal powders, as rhubarb, bark, and charcoal, &c. Secondary hæmorrhage from the tibial artery came on, and was only restrained by powerful pressure, which brought its consequences, intrinsic sloughing; and for months the union of the bones was delayed. The entire loss of substance inflicted by a ball on a bone, causes a great difference to exist between such and common compound fracture from a blow. Splints are necessary in the latter, to prevent riding, which leads to deformity, slowness of union, and constitutional irritation, but less necessary in the former, as shortening must take place, and a nearer approximation of the ends of the bones would lead to earlier union.

14. The case of *Epilepsy* in a European officer of the North Victoria Levy, is a little singular, from the individual being always liable, when in the lower country of Albany, or Beaufort, to asthma, which only is temporarily relieved by medicine, but entirely leaves him when stationed in the upper country of Victoria or Cradock. In lieu of the asthma, however, he has been subject several times to a species of hysterical epilepsy, especially after over-exertion of mind or body in the several arduous duties which he has had to undertake since the commencement of the war in this part of the country. On the occasions in which I saw him in these fits, the plentiful effusion of cold water on the face and head from a large jug sufficed to arrest the continuance of the complaint. Smoking the seeds of stramonium generally relieved the asthmatic fits when obliged to be on duty down below. His father is also a victim to the asthma under similar circumstances, and hence, though formerly living in Lower Caffraria as a missionary, has fixed his residence in the Cradock district now.

15. *Worms* very generally infest people residing on the frontiers of the Eastern province, these parasites being prevalent amongst soldiers, regulars as well as irregulars, and both amongst white and coloured. The frontier Caffres also are much troubled with them; and probably the origin of the complaint amongst the stranger inhabitants may arise from the propagation of the ova from the former to the latter. A predisposition, however, would seem to be necessary, consisting in a poor and unvarying diet, and the scarcity of salt in the food.

Tænia is the species most commonly met with.

16. One of the cases of *Ulcers* was a troublesome varicose ulcer of the leg, which was finally healed by the application of a blister over the sore, which changed the action of the vessels of the part entirely. Cicatrization readily followed, and the part has continued sound now several months. Previous to the application of blister, various ointments and washes were tried without any permanent effect.

II.—REMARKS ON PREVALENT DISEASES AT WHITTLESEA AND SHILOH, from 1st April to 30th September 1852.

The early months of this period seem to have been more pregnant with disease than the later, as common fever, ophthalmia, rheumatism, and catarrh, engrossed more cases in the first three months than in the succeeding three months. One circumstance must, however, be taken into account, namely, the progressive diminution of the force of the district during this period. The weather also during the whole winter was steady and generally fine, though great alternations of temperature were sometimes experienced, but did little harm from the dryness of the air. April was also a much wetter month than any that succeeded, and probably the change at the end of that time from moisture to comparative dryness may have had some effect on the occurrence of disease.

Dysentery had a prevalence to a slight extent, exclusively for June, July, and August, which is probably scorbutic, and to be attributed to the nature of the diet. As most of the cases occurred at Shiloh, it may have been excited by the effluvia from the animal remains and other nuisances that had been allowed to collect about the premises, which, however, were removed on proper representation being made, and no more fresh cases occurred.

Measles will appear to have commenced in July, and exhausted its epidemic violence about the end of September. At the same time there arose an increase in the number of catarrhal cases, chiefly amongst adults, attributable probably to the peculiar state of the atmosphere, thus predisposing to affections of the respiratory mucous membranes.

1. The *Fever* during the six months offers nothing peculiar in character, besides what occurred in a preceding period. One rather serious case, not, however, entered in these returns, occurred in a private patient, a shopkeeper of Whittlesea, aged about forty-five, and rather stout. The disease made its onset suddenly with shivering, and when developed there was

delirium, tending to be violent, restlessness, very dry brown tongue, thirst, costiveness, dry muddy skin, very scanty dark-coloured urine, with pains in the neck, shoulders, and back, very severe. The pulse was at first full, and had an intermission, which went off, however, after the heart was relieved. He was bled three separate times in the course of two or three days, just to incipient syncope, which soon supervened, so that not much blood was drawn altogether. The blood was buffy, and the fibrin and serum of a bilious colour. Delirium ceased after each bleeding; and when reaction took place after each, the fever had abated, the tongue become moist and white, there was less thirst, and the pains of the back lessened. Between each bleeding purges of calomel, followed by neutral salts, were given. The stools produced were excessively dark and offensive. After the last bloodletting more repose was gained, and the brownness of the tongue did not so soon return; but as all the excreting organs seemed obstinately averse to perform their functions, powders containing calomel, nitre, antimony, rhubarb and camphor, in small doses, were commenced, and given every four hours, which produced the desired effect. Profuse perspiration set in; the urine became more plentiful and lighter coloured; the bowels were kept open, and the intestinal secretions maintained; sleep became more prolonged, the thirst less, and the stomach bore nutriment better, which it was now thought advisable to commence with. As the violence of the disease was now broken, the powders were gradually given less often, and when the mouth became affected with the mercury, were stopped, and occasional purgatives and saline diaphoretics given. Antimony was useful as an addition to purgatives, as it obviated any tendency to succeeding costiveness, which frequently is the case in persons so disposed after taking purgatives. The stools had thus regained their natural colour and consistence, and the appetite had returned. Convalescence, however, was slow, and during its course taraxacum in camphor mixture and laxative pills were administered.

This case was under direct treatment about a fortnight. Its nature, I suggest, was that of bilious remittent fever, as the liver seemed the most affected organ, not from any direct symptoms during the height of the disorder, but judging from

the colour of the blood, the muddy countenance and skin, the nature of the stools brought away by mercurial purgatives, and the colour of the urine. The delirium probably under this view arose from retention or absorption of bile in the circulating fluid. Costiveness for some time preceded the attack. The individual was of regular habits, and no drinker. Notwithstanding the apparent want of tolerance for venesection, shown by early supervention of faintness, I judged it expedient to repeat it, from observing the good effects of the subsequent reaction, and that under it the intermission of the pulse disappeared. Camphor was added to the powders, trusting that it would aid the diaphoretic effect, give repose, and tend to keep up the reaction that followed the venesection.

2. The case of *Meningitis* which died was of the same character as those noticed in the report for the foregoing six months, and had advanced to decided effusion in the head before medical aid was called in. No fever existed, but a white tongue, excessive costiveness, total apathy of mind, and impaired sensibility and motorypower. Croton oil was obliged to be given to move the bowels.

3. A few cases of *Bronchitis* and *Pneumonia* occurred in the early period of the rubeolar epidemic, and which were probably produced by a similar state of atmosphere. These all occurred in adults. The peculiar expectoration of pneumonia was present, and the disease appeared to be circumscribed in its extent in the lungs. Neutral saline and antimonial mixtures were administered in every case with benefit, no recourse being found necessary for mercurials except as adjuncts to purgatives at the commencement.

4. One of the cases of *Hepatitis* occurred in the same female subject as in the previous six months, and she fortunately got over this last and most severe attack. The details and remarks on it have already been forwarded. Suffice it to say, that mercurials given as adjuncts to purgatives seemed much more beneficial in this case than when given to produce a constitutional effect, which appeared more of an irritating nature on the liver than otherwise.

The other case of hepatitis proved fatal in a chronic state, which I conjectured had proceeded to abscess, as the lung became involved, with dyspnœa, cough, expectoration of muco-purulent matter, &c. The case took place in a bastard Hottentot, who had been sick some time before applying for medical aid. I regretted I had not a sufficient supply of medicines, of those especially most suitable to such a case, as I think a good deal might have been done with other means than I possessed to have averted or stayed the fatal termination. Mercurials were here also productive of no benefit in small doses so as to affect the system, and brought on an increase of pain instead of relieving it, but as addition to purgatives they were more valuable. The disease was at first mitigated considerably, and much debility remained; but having no other tonics or stomachics than quinine and cinchona, the former brought on a return of pain, and the latter caused constipation when given to increase the appetite and strengthen the system. Sarsaparilla had a good effect; but the supply coming short, no permanent benefit from it was obtained. A return of the active symptoms while in a state of debility, and the involvement of the lung, carried away all hope of the patient recovering, and he finally expressed his opinion as to the uselessness of persevering in taking medicines. No *post-mortem* examination could be obtained.

5. *Rheumatism* is a very frequent complaint in this country, and is often of a serious nature. Colchicum and carbonate of potass I have generally tried with better effect than anything else, chiefly in cases where there is fever. None of these cases require any notice except one in a commissariat issuer, who had been subject for several years to attacks of it every now and then, and had been ill with it during the previous six months, but had recovered to a very good state of health. He had, however, since taken to drinking, and, about the end of July, was suddenly seized with a fit under which he fell down; and on the return of reaction, as apoplectic symptoms manifested themselves, by some delirium, faltering of speech, loss of memory, loss of proper action of one side of the tongue, and pain of the occiput: he was bled to relief of these symptoms, which required to be repeated next day for a return of

the same. On the third day, rhuematism fairly set in with sub-acute fever, the head symptoms disappeared entirely, and local affections of the extremities then commenced. Colchicum and carbonate of potass were administered with considerable benefit, and the rheumatism much abated, and, in fact, he became quite convalescent.

About three weeks after the commencement of the above, on 12th August he was suddenly taken with symptoms of metastatic rheumatism of the heart or diaphragm and the stomach. These symptoms under treatment disappeared; but the disease afterwards ran a course through almost every joint and fibrous structure of the body. As, before this, the supply of colchicum had failed, my only recourse was to compound squill pill with blue pill, but chiefly to nitre in cream-of-tartar water, when the acute symptoms were present, and to bran poultices for the local inflammations. The urine became, under these saline medicines, clear and plentiful, from being scanty and muddy. Convalescence was assisted by quinine mixture, but most benefit resulted from sarsaparilla with iodide of potassium. By 15th September he was restored to a fair state of health, though much crippled from the effects of the disease on the joints. A noticeable point in the case is the supervention of the rheumatic fever after twice venesection—a point on which I am not able to offer any reasonable explanation.

6. *Measles*, for several months before its arrival here, had been prevalent in other surrounding parts of the Eastern province, as Beaufort, Cradock, Graham's Town, &c., where many cases proved fatal from these subsequent effects. This disease attacked also the frontier posts in this part of the country sometime before it reached Whittlesea, as Furness Post, forty miles off, and Khamaston, twelve miles hence. Both white and black were attacked, adult as well as children; but the most numerous cases were amongst the latter. Measles in this colony is only an epidemic at intervals of years, and does not prevail at all seasons, as it does in England, this being the first epidemic since my arrival in the colony about six years ago. Coloured people, old or young, do not seem to suffer much from its invasion; and they do not consider it necessary, nor do they find themselves obliged, to keep to their huts

or take much medicine, so that the majority of actual cases amongst them never came under my cognisance unless they were more severe than the generality. Whittlesea was first attacked by the epidemic, and subsequently Shiloh. No deaths took place to my knowledge in either locality, but some might have occurred amongst the Fingoes who are rather careless and indifferent about life.

The disorder attacked two adult European females, one of whom had it when young. At the commencement of the attack in one where, before the eruption came out, which was tardy, considerable dyspnœa manifested itself, with some other threatening symptoms of affection of the lungs, venesection was adopted with marked benefit, and soon after the skin became affected, and in a few days the disease had run its course, and that mildly. In the other case where no such call showed itself for bleeding, the disease was more protracted and the eruption slow in appearing, and the current and subsequent chest symptoms troublesome, till a spontaneous menorrhagia took place that gave much relief.

Can any analogy be traced between the former of these two cases and the previously detailed one of rheumatism? Both are similar in the circumstance, that after the employment of venesection, the existence of a latent disease, that already pervaded the system, became manifest. Did the loss of blood diminish the vital resistance of the nerves and vessels, which had power sufficient before to counteract the morbific molecular changes, and allow the latter to usurp the dominion over the healthy vital forces? Lithic acid in the one and the rubeolar poison in the other, when retained in the circulation, produced in the first case symptoms of apoplexy, as occurs sometimes in gouty subjects, when the secretion of urine is checked, and in the second engorgement of the lungs; each implication being determined by the peculiar affinities inherent in these morbid constituents of the blood for certain internal organs, when their egress is prevented by the general depuratory excretions of the kidneys and skin.

The most useful treatment amongst the children seemed to be an emetic in the sickening stage, followed by compound jalap powder; and if the eruption was slow in appearing, James's powder, warm bath, and hot drinks brought it out

freely, and relieved the feverish oppression. If, after the subsidence of the eruption, any head or chest symptoms showed themselves, compound jalap powder, followed by the promotion of free perspiration by the above means, sufficed to relieve them. For adults a mixture of antimony and nitre seemed of most consequence during the course of the disease, after the preliminary evacuation.

7. The case of *Phthisis* died 1st October, after six months duration of more decided symptoms, though ill since her arrival at this place in January, from the same cause. Cod-liver oil was tried and found successful in ameliorating the disease for a time, giving strength, improving the bodily appearance, and lessening the cough. After about three weeks use of it, however, some dietary imprudence was followed by smart diarrhœa, and afterwards the oil could never be resumed, from its affecting the stomach and bowels. The course of the disease afforded nothing out of the usual run of such cases. Medicines for diarrhœa and cough required to be changed, as their continuance proved they had lost their efficacy. As a cough-pill, hyoscyamus and ipecacuanha seemed to be of more service, and for a longer period than others I had the means of trying. Decoction of cinchona at first served the double purpose of checking diarrhœa and increasing the appetite Laudanum was, however, the final resource after all others had lost their effect, both for the cough and diarrhœa. Quinine mixture was daily given for the latter periods; and if administered just at the commencement of the accession of the hectic fever, had some effect in shortening its course, and indeed of altogether checking its supervention for that time.

Another case of *Phthisis* subsequently has developed itself, and is now under treatment, in a European girl, aged fourteen, of dark complexion. She had the measles during the epidemic when it visited Shiloh; and as they left her, some suspicion arose that the constitution had received a severe injury from no convalescence taking place from that disease. Various minor disturbances of the economy supervened, as dyspepsia, irregular bowels, spurious uterine pains, as if menstruation were about to commence, some cough, which was merely attributed to the reliquiæ of measles. Most of these adventitious

symptoms disappeared under treatment; but the cough became more developed, and apparent debility remained with considerable constitutional debility. Still, not suspecting phthisis, quinine mixture was given, as I had no milder form of tonic, as there was great loss of appetite and much mental and bodily prostration; but it aggravated the symptoms without increasing the appetite. Stethoscopic examination, however, revealed mischief in the lungs; and phthisis being now conjectured to be the real state of matters, treatment was varied in consequence, with benefit. A cough-mixture of hyoscyamus, ipecacuanha, and soda proved useful, acid remedies of ordinary kind being found hurtful, both to the cough and the stomach.

The known views of the prevalence of excess of acidity in consumptive persons, and the late discovery of a peculiar acid secreted in the air-cells of the lungs, may tend to corroborate the above observation on the treatment of this case. Cod-liver oil was commenced with, in one drachm doses three times a day, and Iceland moss was given as a medicinal nutrient, to which a few grains of columba were added once a day, with the effect of restoring the appetite. The cough has now subsided from its prevalence almost every hour during the night, the evening paroxysms have abated, the strength and appetite have been improved. In both these cases diuretics were found to be injurious, producing symptoms analogous to strangury. In each case was distinctly observed the vermilion border to the edge of the gums, a known characteristic of a phthisical constitution.

8. On the subject of *Dysentery* I may refer to cases already forwarded, for information on the disease as it occurred during this period, and for the theoretical remarks appended thereto. I have little further to add, but to confirm my opinion concerning the use of mercurials in this complaint, and to suggest that their curative effect here may arise from their setting up a counter-irritation in the liver, antagonistic to the irritation of the disease in the colon; and this effect, in my observation, is superior to the mercurial irritation of the whole system for the relief of the disease. It does not appear at all necessary to affect the gums with mercurials in these cases; and those cases in which I have seen the gums affected have not betrayed

much benefit derived from the medicine towards the control of the disease. Amongst a few cases, I may mention that I had ordered powders containing hydrargyrus cum creta to be taken three times a-day, for a mild though obstinate case of dysentery in a female, and the mouth became affected, without influencing the disease at all. But, observing that single powders taken during exacerbations of the disease generally relieved them, they were ordered to be taken under the guidance of the patient's feelings entirely. The mouth did not become again affected, and the disease subsided under this mode of treatment.

In a case where I had found it necessary to administer blue pill to affect the system, and carefully noticing its progress, it appeared that an irritation of the liver was amongst the first symptoms induced, manifested by pain and heat in the region of that organ, which was not concerned in the disease, increased on motion or coughing, pain of the shoulder, and some nausea, and that subsequently the gums became affected, and a perspiration broke out, while the hepatic symptoms subsided. In this case, also, the more troublesome effects of the mineral in the mouth and other parts were got rid of by inducing copious perspiration after the necessity for the mercurial influence no longer existed.

In children I have generally found the greatest benefit to arise from giving a purge of calomel and rhubarb, before giving hydrargyrus cum creta, which was combined with Dover's powder.

The administration of too much opium I have also seen to be injurious; for, when the system gets under its influence, its astringent effect passes off, and a sedative and relaxing one takes place, and the natural symptoms, which ought to guide one day by day in the administration of remedies, become concealed and masked under the state of narcotism. I hence imagine it to be an inexpedient rule to go by in the treatment of this disease, viz., treating the affection by general rules in every case, without regard being paid to symptoms; for the symptoms become as much a guide to judge of the intensity of the disease, and to note the effect of remedies by. As I have neither found reason to push the influence of mercury to affection of the system in every case, so neither do I imagine

any benefit to be attained by narcotising the patient with opium.

The general system should be kept as much as possible from participating in the disease, as in the influence of the remedies given to cure it; and the vital sensibilities must be kept as much awake as possible, both for the purpose of noting the intensity of the morbid action and for allowing nature opportunities of recovering lost ground, by recruiting its powers for repairing the breaches made by the disease, when held in check by medicines. I wish to maintain that nature is the sole curer of the destruction caused by the processes of morbid actions, and that medicines by their more powerful inherent forces than those of the healthy vital, are to restrain the former within such bounds as the latter can act for restoration. Can medicines build cells, fibre or muscular tissue? Can they create new nuclei from their own materials for cell regeneration? Can they hence give material to form a new mucous membrane? Can they supply any gland in the body with new secretion, or reanimate the vital spark when it has fled?

9. During this period of the year, the *Dyspepsia* has shown no season peculiarity, as it did last year. A case or two, with remarks, have already been forwarded. The few most marked cases all seemed unequivocally to be of the bilious description, but unaccompanied with the vomiting, so characteristic of the form of dyspepsia, during the October and November of the preceding period.

10. Disorders of the *Uterine* system and of the *menstruation* are, I understand, of very frequent occurrence through the whole country, both amongst English and Dutch females. It may be attributed, in all likelihood, to imprudent exercise and employment in the early months of pregnancy, which, of course, in a rural population, may be easily imagined. Amongst native or coloured females, disordered menstruation, in most cases, arises from their custom of washing clothes and linen, sitting or standing in the river, whether for themselves or others, as they are the sole washerwomen of the country; European females delegating such work to them entirely. The heat of the climate may contribute a quotum to the same effect. The common

practice of European females riding in this colony from one farm to another, performing other journeys on horseback, as long as what most males could do, I think is among the chief causes of bringing on abortion, or giving a tendency to it. The distance or absence of medical advice and assistance, again precludes the victim of abortion from observing due precautions requsite after such an untoward event; and the consequence is a chronic disease of the uterus is gradually developed, which at last gets so far ahead as to become very difficult of treatment. In such circumstances barrenness generally succeeds, and dysmenorrhœa is a monthly occurrence. In this state, two or three cases already exist in this neighbourhood.

A case, illustrative of the truth of the above remarks, occurred in a female at Whittlesea. Being in about the third month of pregnancy, she continued riding out occasionally as usual, and flooding took place, with abortion of one ovum; and in the interval between this and a similar train of events with the second, as she happened to have twins, she fancied herself well enough to undertake some arduous household duties, which made the second attack more unmanageable than the former. From employing some household remedies at the commencement of the second abortion, subacute inflammation of the womb set in, which, however, was afterwards subdued. She had also, during this illness, hysterical abdominal symptoms, requiring separate treatment, and after a protracted illness, recovery took place.

11. Personally I have been acquainted with the histories of four cases of *Hepatic abscess* in this colony, and do not doubt but they are common. Two cases were idiopathic, that is, resulted from uncomplicated inflammation of the liver; one of which proved fatal by bursting into the peritoneal sac, the abscess being situated between the diaphragm and upper surface of the liver; and the other brought on the death of the patient by exhaustion and debility,—the abscess having opened a passage into the colon.

The other two cases were complicated with dysentery, which was the antecedent disease to the affection of the liver, which began insidiously, no striking symptoms manifesting its

approach, and only later on showed signs of its presence by typhoid or initiative fever, and some obscure local pain.

In one of these cases the abscess had perforated the diaphragm, and invaded the lower lobe of the lung, giving rise to pneumonic symptoms, which masked the local hepatic signs. As no large opening had been made into a bronchial tube, so no large evacuation of purulent matter took place. In the other case the abscess was entirely confined to the substance of the liver, but its upper wall was the diaphragm. Both these cases died of *asthenia*, and the dysenteric symptoms had almost entirely disappeared.

Post-mortem examination disclosed the above conditions of the disease, and the fact that the colonic lesion had been almost cured, as no ulcers in a state of activity were discovered, and these much fewer than expected. Both these men were drinkers, but not drunkards; and both during the treatment for dysentery had administered to them considerable quantities of mercury. I am led to imagine, from what I have already advanced on the action of mercury on the liver, when given in small doses, that this treatment may be no inconsiderable cause, when carried too far, or when too prolonged, of affections of that organ in the sequel of dysentery; and from what I have seen in this colony I have more reason for such a belief than that the absorption of pus from the ulcerated colon is the sole cause of hepatic abscess. Purulent deposits are very different from abscesses from inflammation, both in symptoms and pathological appearance, and could, I should imagine, be scarcely mistaken for the other.

W. T. B.

No. I.—General Return of Sick Officers, Men, Women and Children, of the Irregular Forces of the North Victoria District, distinguishing White from Black, from 1st October 1851 to 31st March 1852.

1851-1852.		Strength.				Febris, Com. Contin.	Phlegmon.	Paronychia.	Ophthalmia.	Meningitis.	Cynanche (Tonsia, Pharyn.).	Pneumonia.	Pleuritis.	Bronchitis.	Hepatitis (Acute, Chron.).	Enteritis.	Otitis.	Rheumat. (Acute, Chron.).	Lumbago.	Erysipelas.	Urticaria.	Hæmaturia.	Phthisis.	Catarrh Ac.	Dysenteria (Acute, Chron.).	Paralysis.	Dyspepsia.	Epilepsia.	Colica.	Diarrhœa.	Mania.	Vermes.	Syphilis.	Gonorrhœa.	Hernia Humor.	Sarcocele.	Hernia.	Dysuria.	Tumor.	Vulnus, Gunshot.	Vulnus.	Contusio.	Ulcus.	Fractura.	Morbus Cutis.	Cephalalgia.	Ozena.	Aphthæ.	Parturitio.	Hysteria.	Amenorrhœa.	Dysmenorrhœa.	Menorrhagia.	Ambustio.	Total.
		Officers.	Men.	Women.	Children.																																																		
White.	Officers..	3	...	...	...			.	...	...	...	..		..	...	..	..	...	.	...	1	.	.	...	...	...	3	..	..	1	...	...	...	.	...	...	...	...	1	...	...	...	...	...	...	..	...	...	...	...	...	6			
	Men ...		59	..	...	7	...	1	6	..	..	..	..	...	1	1	...	...	4	2	1	1	.	.	2	9	1	14	...	1	1	..	..	1	1	...	...	.	1	..	...	1	2	...	.	...	...	...	..	...	...	...	...	58	
	Women	.	...	17	...	2		..	7	.		..	..	...	2	1	..	1		.	.	.	1	5	2	..	13	...	3	...	.	3	...	...	...	..	1	...	..	..	...	...	2	...	..	1	..	...	1	1	1	2	1		50
	Children	.	...	...	40	15			1	1	.	..		...	.	...	1		.	...	...	..	...	5	9		10	1	1	8	..	2	...	...		..	...	...	...		..	...	...		1	...	1	1	.	...	...	...	...	...	57
Black.	Officers..	23	...	...	...	3		.	.	2	1	..	.	...	...	.	..		...	...		..	...	...	5		4	1	...	2	...	1	..	..	...	1	..	..	...	.	..	1	.	1	..	1	..	...	...	..	..	...	...	..	23
	Men... ..		1070	...	...	17	3	..	5	1	1	3	1	2	1			9	1	..	..	1	1	10	13	.	14	..	4	5	..	2	3	2	1	1	.	1	2	18	2	2	...	1	3	...	...	..	...	..	...	..		...	130
	Women	.	...	523	...	2	..	..	3	2		.	1	1	.	...	.	2	.	..			1	5	10	...	8	..	2	.	1	4	..	...	...	..	...	...	...	1	1	..	...	...	1	..	...	...	...	...	1	..		..	46
	Children	.	...	...	1525	11	.	.	.	.	...	...	1	.		.	...	..	...	...	...	..	...	9	13	.		...	...	6	...	...	1	...	..	...	...	...	...	...	...	...	.	...	...	...	...	...	...	...	3	44			
		26	1129	540	1565	57	3	1	22	6	2	3	3	4	4	1	1	16	3	1	2	1	3	36	61	1	66	2	11	23	1	12	5	3	1	2	1	2	2	19	5	5	2	2	5	2	1	1	1	1	2	2	1	3	414

W. T. Black, *Staff-Assist.-Surgeon.*

No. II.—General Return of Diseases, arranged according to the respective Months they occurred in, of the Provisional Forces of the North Victoria District, from 1st October 1851 to 18th March 1852.

1851-1852. Month.	Number of Days on which Rain fell.	Febris, Cont. Contin.	Phlegmon et Abscs.	Paronychia.	Ophthalmia.	Meningitis.	Cynanche (Tons., Pharyn.).	Bronchitis.	Pneumonia.	Pleuritis.	Hepatitis (Acute, Chron.).	Enteritis.	Otitis.	Rheumat. (Acute, Chron.).	Lumbago.	Urticaria.	Erysipelas.	Phthisis.	Hæmaturia.	Catarrh Ac.	Dysenteria (Acute, Chron.).	Dyspepsia.	Epilepsia.	Colica.	Diarrhœa.	Mania	Vermes.	Syphilis Primitiv.	Hernia Humor.	Gonorrhœa.	Sarcocele.	Dysuria.	Tumor.	Hernia.	Vulnus, Gunshot.	Vulnus.	Contusio.	Ambustio.	Ulcus.	Fractura.	Morbus Cutis.	Aphthæ.	Dysmenorrhœa.	Amenorrhœa.	Menorrhagia.	Cephalalgia.	Ozena.	Hysteria.	Parturitio.	Paralysis.	Total.
Oct. ...	6	4	..	1	3	1	..	..	1	1	1	.	1	3	...	...	..	1	...	3	6	2	...	.	1	...		.	1	...	...	1	1	..	3	...	2	2	1	.		.	.	1	...	...	.	...	..	...	41
Nov....	9	10	..	..	5	4	...	2	1	1	1	.		4	2	1	...	..		10	24	24	1	2	5	1	1	1	...	...	..	...	...	1	...	2	1	1	..	...	2	1	2	.	1	.	..	...	..	...	111
Dec. ...	17	9	..	..	4	1		1	1	..	...	1	.	1	...	1	...	1	...	8	20	17	1	2	3	.	2	1	...	..	...	...	..	4	1	...	.	...	..	1	..	...	.	...	2	1	1	...	...	84	
Jan. ...	4	11	1	..	5	1	...	...	...	1	1	...	...	2	1	..	1	1	.	8	7	14		2	8	...	3	2	...	1	...	..	1	...	3	...	.	..	...	...	...	..	..	...	...	...	..	...	1	1	76
Feb. ...	13	14	1	..	3	..	...	...	..		1	...	..	4	..	...	..	...	...	6	5	2	..	3	4	...	2	..	...	1	1	.	...	.	..	..	.	...	...	1	1	...	...	1	...	...	...	...	...	50	
Mar....	5	8	1	...	2	.	2	1		...	..	...	..	2	...	...		...	1	1	..	7	...	2	2	..	4	1	...	1	1	1	.	9	2	2	...	1	1	1	.	...	...	..		...	...	...	...	53	
	54	56	3	1	22	7	2	4	3	3	4	1	1	16	3	2	1	3	1	36	62	66	2	11	23	1	12	5	1	3	2	2	2	1	19	5	5	3	2	2	5	1	2	2	1	2	1	1	1	1	415

W. T. Black, *Staff-Assist.-Surgeon.*

No. III.—Return of Diseases, arranged according to the respective Months which they occurred in, of Sick Officers, Men, Women and Children of the Colonial Forces at Whittlesea, from 1st April to 30th September 1852.

1852. Months.	Number of Days on which Rain fell.	Febris, Com. Contin.	Phlegmon et Abscess.	Paronychia.	Ophthalmia.	Meningitis.	Cynanche Tons.	Pneumonia.	Bronchitis.	Pleuritis.	Hepatitis.	Cystitis.	Otitis.	Rheumat. (Acute, Chron.).	Lumbago.	Odontalgia.	Rubeola.	Phthisis.	Catarrh (Acute).	Dysenteria (Acute, Chron.).	Paralysis.	Dyspepsia.	Colica.	Diarrhœa.	Vermes.	Syphilis.	Hernia Humor.	Obstipatio.	Calculus Urethra.	Vulnus Sclopet.	Vulnus.	Contusio.	Ambustio.	Ulcus.	Fractura.	Morbus Cutis.	Hæmaturia.	Amenorrhœa.	Dysmenorrhœa.	Menorrhagia.	Hysteria.	Otalgia.	Abortio.	Parulis.	Metritis.	Convulsio.	Total.	
April	8	5	1	..	5	..	1	..	..	..	.	..	1	3	..	..	..	..	6	2	..	5	..	1	1	..	..	..	1	..	1	..	..	..	1	..	1	1	1	1	1	..	..	..	..	..	39	
May	4	2	1	1	3	..	1	..	1	..	..	..	..	2	1	1	.	..	6	..	..	4	2	..	2	1	.	..	..	..	1	2	1	2	..	..	..	1	..	..	..	..	..	..	..	36		
June	2	1	1	..	1	.	.	..	..	1	1	..	..	3	2	..	..	1	3	5	..	5	2	1	..	1	..	..	..	..	..	1	..	..	..	2	..	1	1	..	..	1	..	.	..	..	34	
July	2	2	1	..	1	1	..	..	1	..	..	1	..	3	1	..	2	.	3	3	..	6	.	2	..	..	1	1	..	..	..	..	1	..	..	3	..	..	..	..	..	.	..	..	..	..	34	
August	1	1	.	..	..	..	.	3	1	..	1	..	..	2	..	.	32	.	7	5	1	4	1	1	2	1	..	2	..	1	2	..	1	..	..	1	..	.	..	..	..	1	.	..	..	..	68	
September	6	2	1	..	..	..	..	.	..	..	..	..	..	1	..	..	19	..	1	1	..	4	..	..	1	1	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	1	1	1	37
	23	13	5	1	10	1	2	3	3	1	2	1	1	14	4	1	53	1	26	16	1	28	5	5	6	4	1	3	1	1	4	3	3	2	1	7	1	3	2	2	2	1	1	1	1	1	248	

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